

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
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**or Fax (571) 273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26191 7590 08/05/2005

**FISH & RICHARDSON P.C., P.A.**  
**60 SOUTH SIXTH STREET**  
**SUITE 3300**  
**MINNEAPOLIS, MN 55402**

11/04/2005 MAHMEDE2 00000026 10650525

01 FC:2501 700.00 OP  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<b>Jill Huso</b>	(Depositor's name)
<i>Jill Huso</i>	(Signature)
<b>11/01/2005</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/650,525	08/28/2003	Aladin Sabbagh	16337-002001/ 432871GA-G	6792

TITLE OF INVENTION: **DEVICE FOR TREATING THE TEMPOROMANDIBULAR JOINT**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, CAMTU TRAN	3743	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Fish & Richardson P.C., P.A.**

2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

*M. Angela Parsons*

(Date)

**November 1, 2005**

Typed or Printed Name

**M. Angela Parsons, Ph.D.**

Registration No. 44,282

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Aladin Sabbagh  
Serial No. : 10/650,525  
Filed : August 28, 2003

Art Unit : 3743  
Examiner : Camtu Tran Nguyen  
Confirmation No.: 6792

Notice of Allowance Date: August 5, 2005

Title : DEVICE FOR TREATING THE TEMPOROMANDIBULAR JOINT

**MAIL STOP ISSUE FEE**

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TRANSMITTAL LETTER

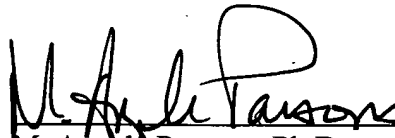
The following documents relating to this application are enclosed.

1. Response to Notice of Allowance (1 page);
2. Transmittal Form PTOL 85B (1 page);
3. Check in the amount of \$1030 (\$700 for the Issue Fee, \$300 for the Publication Fee and \$30 for the patent copies); and
4. Postcard.

Please apply any charges or credits to Deposit Account No. 06-1050.

Respectfully submitted,

Date: November 1, 2005

  
M. Angela Parsons, Ph.D.  
Reg. No. 44,282

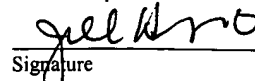
Fish & Richardson P.C., P.A.  
60 South Sixth Street  
Suite 3300  
Minneapolis, MN 55402  
Telephone: (612) 335-5070  
Facsimile: (612) 288-9696  
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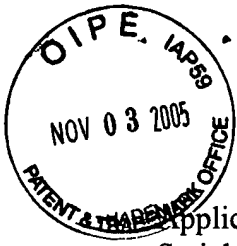
November 1, 2005

Date of Deposit

  
Signature

Jill Huso

Typed or Printed Name of Person Signing Certificate



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RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed August 5, 2005, enclosed are the Issue Fee Transmittal Form PTOL 85B and a check for \$1030 for the required Issue Fee and Publication Fee, including patent copies.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date:

November 1, 2005

M. Angela Parsons, Ph.D.  
Reg. No. 44,282

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